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APPLICANTS MRC									
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** CONTINUING DATA **********************************									
Foreign Priority claimed				OTATE OR	- Cu		тот	۸.	" DEDENIDENT
35 USC 119 (a-d) conditions yes no Met after Allowance				STATE OR		SHEETS			INDEPENDENT
Verified and Manual Country Acknowledged Examiner's Signature Initials ID					DRAWING CLAI 11 20				CLAIMS 3
ADDRESS 21658 DYKAS, SHAVER & NIPPER, LLP P.O. BOX 877 802 WEST BANNOCK STREET, SUITE 405 BOISE, ID 83701									
TITLE Sterilization apparatus for orthodontic bands									
l N	FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following:					All Fees 1.16 Fees (Filing) 1.17 Fees (Processing Ext. of time)			